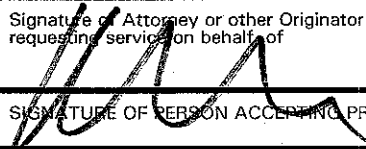



FILED
IN CLERKS OFFICE

Department of the Treasury
Federal Law Enforcement Agencies
PROCESS RECEIPT AND RETURN

2006 JUN 13 A 9:28

PLAINTIFF UNITED STATES OF AMERICA		COURT CASE NUMBER U.S. DISTRICT COURT CA No. 04-10345-NMG DISTRICT OF MASS.	
DEFENDANT MOHAMMED ABDUL AZIZ QURAISHI		TYPE OF PROCESS Preliminary Order of Forfeiture	
SERVE AT	Name Of Individual, Company, Corporation, Etc. to Serve or Description of Property to Seize: Bruce Berns, Esquire, as counsel for Bank of America		
	Address (Street or RFD / Apt. # / City, State, and Zip Code): Abend, Roth, Berns & Warner LLC, 47 Church Street, Suite 301, Wellesley, MA 02482.		
Send NOTICE OF SERVICE copy to Requester: KRISTINA E. BARCLAY, ASSISTANT U.S. ATTORNEY UNITED STATES ATTORNEY'S OFFICE John Joseph Moakley United States Courthouse 1 Courthouse Way, Suite 9200 Boston, Massachusetts 02210		Number Of Process To Be Served In This Case.	
		Number Of Parties To Be Served In This Case.	
		Check Box If Service Is On USA	
SPECIAL INSTRUCTIONS or OTHER INFORMATION TO ASSIST IN EXPEDITING SERVICE (includes Business and Alternate Addresses, Phone Numbers, and Estimated Availability times.) Please serve the attached Preliminary Order of Forfeiture upon the above-referenced individual by certified mail, return receipt requested. KAB x3294			
Signature of Attorney or other Originator requesting service on behalf of 		[X] Plaintiff [] Defendant	Telephone No. (617) 748-3100 Date March 16, 2006
SIGNATURE OF PERSON ACCEPTING PROCESS: 			Date
SPACE BELOW FOR USE OF TREASURY LAW ENFORCEMENT AGENCY			
I acknowledge receipt for the Total # of Process Indicated.	District of Origin No. _____	District to Serve No. _____	SIGNATURE OF AUTHORIZED TREASURY AGENCY OFFICER: Date
I hereby Certify and Return That I [] PERSONALLY SERVED, [] HAVE LEGAL EVIDENCE OF SERVICE, <input checked="" type="checkbox"/> I HAVE EXECUTED AS SHOWN IN "REMARKS", the Process Described on the Individual, Company, Corporation, Etc., At The Address Shown Above or at the Address Inserted Below.			
[] I HEREBY CERTIFY AND RETURN THAT I AM UNABLE TO LOCATE THE INDIVIDUAL, COMPANY, CORPORATION, ETC. NAMED ABOVE.			
NAME & TITLE of Individual Served If not shown above:		[] A Person of suitable age and discretion then residing in the defendant's usual place of abode.	
ADDRESS: (Complete only if different than shown above.)		Date of Service	Time of Service [] AM [] PM
		Please See Remarks Below	
		Signature, Title and Treasury Agency Stephen P. Leonard, Forfeitures Officer U.S. Customs and Border Protection	
REMARKS: Preliminary Order served as directed above by certified mail number 7001 2510 0003 4299 9301. Copy attached showing receipt on 6/2/06. (Copy of Postal			
TD F 90-22.48 (6/96) receipt attached.)			

☐ RETURN TO COURT ☐ FOR CASE FILE ☐ LEAVE AT PLACE OF SERVICE ☐ FILE COPY

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL

BOSTON KENNEDY STA
JUN 01 2006
Postmark

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To **Bruce Berns, Esq.**
~~Abend, Roth, Berns & Warner LLC~~
Street, Apt. No.,
or PO Box No. **47 Church ST. Suite 301**
City, State, Zip **Wellesley, MA 02482**

PS Form 3800, January 2001 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature X <i>B Berns</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>B Berns</i> C. Date of Delivery <i>6/2/06</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to: Bruce Berns Esq. Counsel for Bank of America Abend, Roth, Berns & Warner LLC 47 Church St., Suite 301 Wellesley, MA 02482</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number 7001 2510 0003 4299 9301 (Transfer from service _____)</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-0381</p>	